

**TRANSMITTAL AND NOTICE OF APPROVAL OF  
STATE PLAN MATERIAL**

**FOR: HEALTH CARE FINANCING ADMINISTRATION**

1. TRANSMITTAL NUMBER:

0 1 — 0 0 8

2. STATE:

CA

3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)

TO: REGIONAL ADMINISTRATOR  
HEALTH CARE FINANCING ADMINISTRATION  
DEPARTMENT OF HEALTH AND HUMAN SERVICES

4. PROPOSED EFFECTIVE DATE

January 1, 2001

5. TYPE OF PLAN MATERIAL (Check One):

☐ NEW STATE PLAN

☐ AMENDMENT TO BE CONSIDERED AS NEW PLAN

☒ AMENDMENT

COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AMENDMENT (Separate Transmittal for each amendment)

6. FEDERAL STATUTE/REGULATION CITATION:

7. FEDERAL BUDGET IMPACT:

a. FFY 2000-01 \$ 244

b. FFY \$

8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:

Supplements 1a, ~~1b~~, 1d, ~~1e~~, and ~~1f~~ to  
Attachment 3.1-A (page 1)

9. PAGE NUMBER OF THE SUPERSEDED PLAN SECTION OR ATTACHMENT (If Applicable):

Supplements 1a, ~~1b~~, 1d, ~~1e~~, and ~~1f~~ to  
Attachment 3.1-A (page 1)

10. SUBJECT OF AMENDMENT:

Local Government Agencies providing Targeted Case Management Services

11. GOVERNOR'S REVIEW (Check One):

☐ GOVERNOR'S OFFICE REPORTED NO COMMENT

☐ COMMENTS OF GOVERNOR'S OFFICE ENCLOSED

☒ NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL

☒ OTHER, AS SPECIFIED:

Governor's Office does not wish to review State Plan amendments

12. SIGNATURE OF STATE AGENCY OFFICIAL:

13. TYPED NAME:

Gail Margolis

14. TITLE:

Deputy Director, Medical Care Services

15. DATE SUBMITTED:

3/21/01

16. RETURN TO:

Department of Health Services  
714 P Street, Room 1640  
Sacramento, CA 95814

Attn: State Plan Coordinator

**FOR REGIONAL OFFICE USE ONLY**

17. DATE RECEIVED:

March 21, 2001

18. DATE APPROVED:

May 3, 2001

**PLAN APPROVED - ONE COPY ATTACHED**

19. EFFECTIVE DATE OF APPROVED MATERIAL:

January 1, 2001

20. SIGNATURE OF REGIONAL OFFICIAL:

21. TYPED NAME:

Linda Minamoto

22. TITLE: Associate Regional Administrator  
Division of Medicaid

23. REMARKS:

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT

State/Territory: California

---

CASE MANAGEMENT SERVICES

A. Target Group:

Title XIX eligible, high-risk persons identified as having a need for public health case management services including the following individuals:

- Women, infants, children and young adults to age 21
- Persons with HIV/AIDS
- Persons with reportable communicable diseases
- Pregnant women
- Persons who are technology dependent
- Persons who are medically fragile
- Persons with multiple diagnoses

"High-risk persons" are those who have failed to take advantage of necessary health care services, or do not comply with their medical regimen or who need coordination of multiple medical, social and other services due to the existence of an unstable medical condition in need of stabilization, substance abuse or because they are victims of abuse, neglect, or violence.

Payment for case management services will not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.

Case management services that provided in accordance with Section 1915(g) of the Social Security Act will not duplicate case management services provided under any home and community-based service waiver.

There shall be a county-wide system to ensure coordination among providers of case management services provided to beneficiaries who are eligible to receive case management services from two or more programs.

B. Areas of State in which services will be provided:

☐ Entire State

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than Statewide): Alameda, Amador, Butte, Calaveras, Contra Costa, El Dorado, Fresno, Glenn, Humboldt, Imperial, Kern, Kings, Lake, Lassen, Marin, Mendocino, Merced, Monterey, Napa, Nevada, Orange, Placer, Plumas, Riverside, Sacramento, San Benito, San Bernardino, San Diego, San Francisco, San Joaquin, San Luis Obispo, San Mateo, Santa Barbara, Santa Clara, Shasta, Solano, Sonoma, Stanislaus, Sutter, Trinity, Tulare, Tuolumne, Ventura, Yolo and Yuba counties, City of Berkeley, City of Long Beach, and the City of Pasadena.

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT  
State/Territory: California

---

CASE MANAGEMENT SERVICES

A. Target Group:

Title XIX eligible individuals:

Individuals, 18 years or older, who have exhibited an inability to handle personal, medical, or other affairs, who are under conservatorships of person and/or estate or a representative payee.

Payment for case management services will not duplicate payments made to public agencies or private entities under other program authorities for the same purposes.

Case management services provided in accordance with Section 1915(g) of the Social Security Act will not duplicate case management services provided under any home and community-based services waiver.

There shall be a county-wide system to ensure coordination among providers of case management services provided to beneficiaries who are eligible to receive case management services from two or more programs.

B. Areas of State in which services will be provided:

☐ Entire State.

☒ Only in the following geographic areas (authority of Section 1915(g)(1) of the Act is invoked to provide services less than Statewide): Alameda, Butte, Contra Costa, El Dorado, Fresno, Glenn, Humboldt, Imperial, Lake, Lassen, Los Angeles, Marin, Napa, Orange, Placer, Riverside, Sacramento, San Bernardino, San Diego, San Francisco, San Joaquin, San Mateo, Santa Barbara, Santa Cruz, Shasta, Sonoma, Stanislaus, Trinity, Tulare, Yolo and Yuba counties, City of Berkeley.

C. Comparability of Services

☐ Services are provided in accordance with Section 1902(a)(10)(B) of the Act.

☒ Services are not comparable in amount, duration, and scope. Authority of Section 1915(g)(1) of the Act is invoked to provide services without regard to the requirements of Section 1902(a)(10)(B) of the Act.

D. Definition of Services:

Targeted case management services include needs assessment, setting of objectives related to needs, individual service planning, service scheduling, and periodic evaluation of service effectiveness. Case management services ensure that the changing needs of the Medi-Cal eligible person are addressed on an ongoing basis and appropriate choices are provided among the widest array of options for meeting those needs. Case management includes the following: